

DEPARTMENT OF BENEFIT PAYMENTS

744 P Street, Sacramento, CA 95814



June 27, 1975

ALL-COUNTY LETTER NO. 75-128

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: COMPREHENSIVE EMPLOYMENT TRAINING ACT EMPLOYEES (CETA)

REFERENCE:


Many counties are taking advantage of the CETA Program to augment welfare department staff. The salaries and benefits of these employees are being funded 100 percent by the Department of Labor. Consequently, these costs are not being shown on the County Administrative Expenditure Claim. We would like to know the extent of the CETA Program within California.

Please provide us with a breakdown, by function, of CETA staff currently employed by the County Welfare Department. For your convenience the attached reply form was designed. We are requesting the number of CETA employees performing eligibility, social services, administrative, and clerical functions.

When completing the form, use DFA 325.1 of the County Administrative Expenditure Claim as a guideline. Designate the CETA employee's function by determining where the salary would be claimed for reimbursement if it was processed through the Administrative Claim. Determine whether it would be shown under Group I-A - Allocable Social Services, Group I-B - Allocable Eligibility and Nonservice, Group II A-1 - Clerical Support or Group II A-2 - Administrative Support. Then indicate on the attached reply form the number of CETA employees under each category. Please submit this form by July 31, 1975.

If you have any further questions, please contact Kathy Farmer or Bobi Gould at 916/445-7046.

Sincerely,


WILLIAM J. KUNTZ
Deputy Director**OBSOLETE**

Superseded by

ACI # 77-15

Issued 3-17-77

cc: CWDA

Attachment

GEN 654 (2/75)

COUNTY WELFARE DEPARTMENT
CETA EMPLOYEES

County _____

Date _____

Please indicate, by function, the number of CETA workers employed by the County Welfare Department. Submit this form no later than July 31, 1975.

ELIGIBILITY WORKERS	_____
SOCIAL SERVICES	_____
ADMINISTRATIVE SUPPORT	_____
CLERICAL SUPPORT	_____

Return to: Department of Benefit Payments
Claims Audit and Control, M.S. 13-76
744 "P" Street
Sacramento, CA 95814